						AAEIAIMIM 284	01 (2-99)
DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION			Attorney Dock	et Number	7435-2	2	
			First Named In	ventor	Alan M	lichael Cox	
	☐ Declaration Submitted after Initial Filing (surcharge (37 CFF 1.16(e)) required)		COMPLETE IF KNOWN				
t i Deciaration stromitted with		_	Application No.				
			Filing Date				
			Group Art Unit				
		su)	Examiner's Name				
As a below named inventor, I he My residence, post office address of the leve I am the original, first joint inventor (if plural names are is sought on the invention entitled by the specification of which (check one) is attached hereto. Was filed onApril 24 PCT International Application And was amended onI hereby state that I have revincluding the claims, as amended I acknowledge the duty to disc accordance with Title 37, Code of the control of the contro	ess and citizensh and sole inventor elisted below) of ed. 4. 2000 as Unit cation No iewed and under d by any amendration of Federal Regula	ted State PCT/G erstand tement references, §	one name is ject matter when see Application B00/01601 the contents ferred to above a material to the contents of the contents ferred to above the contents of the contents	No. or (if a of the above.)	pplicable	ied specific	cation,
I hereby claim foreign priority beneapplication(s) for patent or inventor's east one country other than the Unbecking the box, any foreign application on which priority is claimed.	certificate, or 36 United States of cation for patent ed:	65(a) of a f Americ or inven	any PCT inter a, listed belo	mational a ow and ha te having a	pplication ave also a filing da	which desi	ignated at below, by hat of the
Prior Foreign Application Number(s)	Country	(MM/DE		Priority N Claimed	Atte	rilled Copy sched? Yes	
PCT/GB00/01601	PCT	04/25	/ 00				×
9909252.0	GB	04/23	/99				⊠
I hereby claim the benefit under 35 U.S.C. 119(e)		ovisional app	olication(s) listed be	low.			
Application Number(s) Filing Dat	e (MM/DD/YYYY)	su	l Additional pro pplemental priori				

below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, \$1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application: Parent Filing Date Parent Patent U.S. Parent Application or PCT Parent (MM/DD/YYYY) Number Number . (if applicable) ☐ Additional US or PCT International application numbers are listed on a supplement priority data sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: Place Customer Customer Number Number Bar Code Label Here OR X Registered practioner(s) name/registration number listed below. Registration Number Name **Registration Number** Name Thomas Q. Henry 28,309 Additional registered practioner(s) named on supplemental Registered Practioner Information sheet PTO/SB/02C attached hereto. X OR Direct all correspondence to: Customer Number Correspondence address below Bar Code Label Name Thomas Q. Henry Firm Name WOODARD EMHARDT NAUGHTON MORIARTY & McNETT Address 111 Monument Circle, Bank One Tower Suite 3700 Address IN ZIP City State 46204 Indianapolis 317-637-7561 Country USA Telephone 317/634-3456 Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Full name of sole or first inventor: **Family Name** Given Name (first Alan Michael Cox or Surname and middle, if any) Date of Signature: Inventor's Signature: Residence: Levenshulme, Manchester City, State, Country) **United Kingdom** Citizenship: GB **Post Office** 2 Marl y Road, Levenshulme, Manch ster Address: M19 2TA, United Kingd m

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed

	joint inventor, if any:					
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Citizenship:						
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Full name of additional	oint inventor, if any:					
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and middle, if any)		or Surname				
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Inventor's Signature:		Signature:				
Residence:	and the second s		L			
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, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	W. C. S. C.					
Citizenship:						
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DECLARATION

Registered Practitioner Information (Supplemental Sheet)

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	Number		Number
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John V. Moriarty	26,207		
John C. McNett	25,533		
Thomas Q. Henry	28,309		
James M. Durlacher	28,840		
Charles R. Reeves	28,750		
Vincent O. Wagner	29,596		
Steve Zlatos	30,123		
Spiro Bereveskos	30,821	•	•
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R. Randall Frisk	32,221		
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Kenneth A. Gandy	33,386		
Timothy N. Thomas	35,714		
Kurt N. Jones	37,237		
John H. Allie	39,088		
Holiday W. Banta	40,311		
Troy J. Cole	35,102		
L. Scott Paynter	39,797		
Charles J. Meyer	41,996		
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Gregory B. Coy	40,967		
Lisa A. Hiday	40,036		
John V. Daniluck	40,581		
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Brad A. Schepers	45,431		
Scott J. Stevens	29,446		
James B. Myers	42,021		
John M. Bradshaw	46,573		
Charles P. Schmal	45,082		
Edward E. Sowers	36,015	()	

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